



Motor Vehicle Division

40-0402e R04/03 www.dot.state.az.us

Mail Drop 526M
Motor Carrier and Tax Services
Motor Vehicle Division
PO Box 2100
Phoenix AZ 85001-2100

PERMANENT FLEET APPLICATION

Account Number (MVD Use)

Application Type

- ☐ Permanent Fleet Registration — Two or more vehicles owned and registered to the same entity. A person or company may register a fleet on an annual basis, so that all the vehicle registrations expire in the same month.
- ☐ Allocated Permanent Fleet Registration — A rental fleet of passenger vehicles where the company has rental locations in two or more states and has opted to have permanent registration credentials in the vehicles. Requires completion of an Allocated Rental Fleet Application which must be filed annually.

Business Type <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> L.L.C. <input type="checkbox"/> L.L.P				Federal Employer Identification Number (FEIN)			
US DOT Number (if applicable)		IRP Number (if applicable)		IFTA Number (if applicable)			
Business Name				DBA (doing business as)			
Business Address				City		State	Zip
Mailing Address				City		State	Zip
Contact Person				Phone ()		Fax ()	

Applicants: Full name, no initials. If no middle name, write "none". Title: Sole Owner, Partner, Corporate Officer (President, Vice President, Secretary, etc.) or Director. If more space is needed, attach a separate sheet.

1. Applicant Name (first, middle, last, suffix)			Title		Driver License Number		State
Residence Address			City		State	Zip	
2. Applicant Name (first, middle, last, suffix)			Title		Driver License Number		State
Residence Address			City		State	Zip	
3. Applicant Name (first, middle, last, suffix)			Title		Driver License Number		State
Residence Address			City		State	Zip	

Number of Vehicles in Arizona Fleet	Registration Expiration Indicate the desired month of expiration:	1 st Choice	2 nd Choice (if 1 st is unavailable)
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Vehicles over 55,000 lbs gross vehicle weight (GVW) must be reported to the Internal Revenue Service on Form 2290 Heavy Highway Vehicle Use Tax Return with Schedule 1. A copy of the form and schedule must be filed with the Motor Vehicle Division at the time of registration renewal.

Attach a list of the vehicles to be included in the fleet (please provide: plate, vehicle identification number, year and make), or a copy of the vehicle registrations. Mail this application and the list or copies to the address above. If more than one fleet is desired, an additional application must be completed.

Certification: Individual — Requires signature of the owner indicated above.
Partnership — Requires signature of all partners indicated above.
Corporation — Requires signature of the officer indicated above.
Limited Liability Corporation — Requires signature of the member/manager indicated above.
Limited Liability Partnership — Requires signature of all partners indicated above.

I certify that the information above is true and correct, and that this business will comply with the laws of the State of Arizona.

Owner, Partner or Officer Signature	Date	Title	
2nd Partner Signature	Date	3rd Partner Signature	Date

If you have any questions, please call Phoenix 602-712-6775, Tucson 520-629-9808, elsewhere in Arizona 800-251-5866, (TDD Hearing/Speech Impaired: Phoenix 602-712-3222, elsewhere 800-324-5425). Thank you.